

Fill in this information to identify your case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF WASHINGTON

Case number (if known) _____

Chapter you are filing under:

☒ Chapter 7☐ Chapter 11☐ Chapter 12☐ Chapter 13☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself**About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Robert

First name

C

Middle name

Van Duker

Last name and Suffix (Sr., Jr., II, III)

Tiffany

First name

S

Middle name

Van Duker

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**xxx-xx-3055****xxx-xx-1155**

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

☒ I have not used any business name or EINs.

☒ I have not used any business name or EINs.

Include trade names and *doing business as* names

Business name(s)

Business name(s)

EIN

EIN

5. Where you live

**26525 98th Ave., NW
Stanwood, WA 98292**

Number, Street, City, State & ZIP Code

Snohomish

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13
-
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
-
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
☐ Yes.
- | | | |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
-
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No
☐ Yes.
- | | | |
|----------------|---------------------------|-----------------------------|
| Debtor _____ | Relationship to you _____ | |
| District _____ | When _____ | Case number, if known _____ |
| Debtor _____ | Relationship to you _____ | |
| District _____ | When _____ | Case number, if known _____ |
-
11. **Do you rent your residence?** ☐ No. Go to line 12.
☒ Yes. Has your landlord obtained an eviction judgment against you?
- ☒ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

☐ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

☒ No.

☐ Yes. What is the hazard? _____

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

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I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17.
	16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17.
	16c. State the type of debts you owe that are not consumer debts or business debts

17. Are you filing under Chapter 7?	<input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
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19. How much do you estimate your assets to be worth?	<input checked="" type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input checked="" type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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Part 7: Sign Below

For you	<p>I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.</p> <p>If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.</p> <p>If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.</p>				
	<table border="0"><tr><td style="vertical-align: top;">/s/ Robert C Van Duker Robert C Van Duker Signature of Debtor 1</td><td style="vertical-align: top;">/s/ Tiffany S Van Duker Tiffany S Van Duker Signature of Debtor 2</td></tr><tr><td style="vertical-align: top;">Executed on September 18, 2020 MM / DD / YYYY</td><td style="vertical-align: top;">Executed on September 18, 2020 MM / DD / YYYY</td></tr></table>	/s/ Robert C Van Duker Robert C Van Duker Signature of Debtor 1	/s/ Tiffany S Van Duker Tiffany S Van Duker Signature of Debtor 2	Executed on September 18, 2020 MM / DD / YYYY	Executed on September 18, 2020 MM / DD / YYYY
/s/ Robert C Van Duker Robert C Van Duker Signature of Debtor 1	/s/ Tiffany S Van Duker Tiffany S Van Duker Signature of Debtor 2				
Executed on September 18, 2020 MM / DD / YYYY	Executed on September 18, 2020 MM / DD / YYYY				

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Thomas D. Neeleman
Signature of Attorney for Debtor

Date **September 18, 2020**
MM / DD / YYYY

Thomas D. Neeleman 33980
Printed name

Neeleman Law Group, P.C.
Firm name

**1904 Wetmore Ave., Suite 200
Everett, WA 98201**
Number, Street, City, State & ZIP Code

Contact phone **(425) 212-4800**Email address **courtmail@expresslaw.com**

33980 WA
Bar number & State

Official Form 101

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Voluntary Petition for Individuals Filing for Bankruptcypage 7

AARONS INC.
525 E COLLEGE WAY, STE B1
MOUNT VERNON, WA 98273

ACCOUNT RESOLUTION SERVICES
1643 NW 136TH AVE
SUNRISE, FL 33323

ACCOUNTS RECEIVABLE
1307 NE 78TH STREET
VANCOUVER, WA 98665

ACTION COLLECTION SVC
P.O. BOX 5425
BOISE, ID 83705

ALLIED CREDIT SERVICES
P.O. BOX 2449
GIG HARBOR, WA 98335

ALLTRAN FINANCIAL LP
P.O. BOX 610
SAUK RAPIDS, MN 56379

AMERICAN FIRST FINANCE
7330 W. 33RD STREET
WICHITA, KS 67205

AMERICAN FIRST FINANCE
ATTN: BANKRUPTCY
PO BOX 565848
DALLAS, TX 75356

ARMADA CORP
ATTN: BANKRUPTCY
PO BOX 709
WENATCHEE, WA 98807

ASSOCIATED CREDIT SERV
12815 E SPRAGUE AVENUE
SPOKANE, WA 99216

AUDIT & ADJUSTMENT
PO BOX 1959
LYNNWOOD, WA 98036

BAXTER ECU/BCU
ATTN: BANKRUPTCY
PO BOX 8133
VERNON HILLS, IL 60061

BETTER DAY LOANS
P.O. BOX 6882
SANTA ROSA, CA 95406

CASCADE NATURAL GAS
P.O. BOX 5600
BISMARCK, ND 58506

CASCADE RADIOLOGY CONSULTANTS
P.O. BOX 1247
COVINGTON, GA 30015

CASCADE VALLEY
20700 44TH AVE WEST, SUITE 100
LYNNWOOD, WA 98036

CHASE
270 PARK AVE
NEW YORK, NY 10017

CITIBANK/SHELL OIL
CITICORP CREDIT SRVS/CENTRALIZED BK DEPT
PO BOX 790034
ST LOUIS, MO 63179

CITY OF MT. VERNON
910 CLEVELAND AVE
MOUNT VERNON, WA 98273

COVERGENT OUTSOURCING, INC.
P.O. BOX 9004
RENTON, WA 98057

CREDIT ACCEPTANCE
25505 WEST 12 MILE ROAD
SUITE 3000
SOUTHFIELD, MI 48034

CREDIT COLLECTION SERVICES
725 CANTON ST.
NORWOOD, MA 02062

CREDIT ONE BANK
ATTN: BANKRUPTCY DEPARTMENT
PO BOX 98873
LAS VEGAS, NV 89193

CREDIT PROTECTION ASSOC.
P.O. BOX 9035
ADDISON, TX 75001

CREDITS INC.
P.O. BOX 127
HERMISTON, OR 97838

DEPARTMENT OF EDUCATION/582/NELNET
ATTN: BANKRUPTCY
PO BOX 82561
LINCOLN, NE 68501

DIRECT TV
2230 E IMPERIAL HWY, FL10
EL SEGUNDO, CA 90245

DISH NETWORK
9601 S. MERIDIAN BLVD
ENGLEWOOD, CO 80112

DSHS/DCS EVERETT
840 NORTH BROADWAY
EVERETT, WA 98203

DSHS/DIVISION OF CHILD SUPPORT TACOMA
ATTN: BANKRUPTCY
PO BOX 11520
TACOMA, WA 98411

ENHANCED RECOVERY CORP
ATTN: BANKRUPTCY
8014 BAYBERRY ROAD
JACKSONVILLE, FL 32256

EOS CCA
ATTN: BANKRUPTCY
700 LONGWATER DR
NORWELL, MA 02061

FAMILY CARE NET
20700 44TH AVE WEST, SUITE 100
LYNNWOOD, WA 98036

FINGERHUT
ATTN: BANKRUPTCY
6250 RIDGEWOOD ROAD
SAINT CLOUD, MN 56303

FIRST NATIONAL COLLECTION
610 WALTHAM WAY
SPARKS, NV 89434

FRONTIER
P.O. BOX 740407
CINCINNATI, OH 45274

FRONTIER COMMUNICATIONS
19 JOHN ST.
MIDDLETOWN, NY 10940

GENESIS RETAIL
P.O. BOX 4477
BEAVERTON, OR 97076

HRRG
P.O. BOX 5406
CINCINNATI, OH 45273

IC SYSTEM, INC.
ATTN: BANKRUPTCY
PO BOX 64378
ST. PAUL, MN 55164

IC SYSTEMS
WAVE BROADBAND
444 HWY 96 EAST
P.O. BOX 64378
SAINT PAUL, MN 55164

IRHYTHM
DEPT CH 18717
PALATINE, IL 60055

IRS
CENTRALIZED INSOLVENCY
P.O. BOX 7346
PHILADELPHIA, PA 19101-7346

JEANNIE ENGLUND, ATTORNEY
SB&C LTD.
P.O. BOX 1048
MOUNT VERNON, WA 98273

LES SCHWAB TIRE #902
ATTN: BANKRUPTCY
PO BOX 5350
BEND, OR 97708

MERCHANTS CREDIT ASSOCIATION
ATTN: BANKRUPTCY
PO BOX 7416
BELLEVUE, WA 98008

MIDLAND FUNDING LLC
ATTN: BANKRUPTCY
PO BOX 939069
SAN DIEGO, CA 92193

MONEY TREE
425 COLLEGE WAY, SUITE 110
MOUNT VERNON, WA 98273

MRS
1930 OL NEY AVE
CHERRY HILL, NJ 08003

NORTH CASCADE FAMILY PHYSICIA
2116 E SECTION ST.
MOUNT VERNON, WA 98274

NW PATHOLOGY
PO BOX 2837
BELLINGHAM, WA 98227

PLANNED PARENTHOOD
P.O. BOX 1443
BELLINGHAM, WA 98227

PROGRESSIVE
P.O. BOX 894105
LOS ANGELES, CA 90189

PROVIDENCE HOSPITAL
1700 13TH STREET
EVERETT, WA 98201

PUGET SOUND ENERGY
PO BOX 92169
BELLEVUE, WA 98009-8269

QUICK COLLECTIONS
P.O. BOX 4266
VANCOUVER, WA 98662

RELIABLE CREDIT ASSOCIATION
ATTN: BANKRUPTCY
PO BOX 22829
MILWAUKEE, OR 97269

RESURGENT CAPITAL SERVICES
ATTN: BANKRUPTCY
POB 10497
GREENVILLE, SC 29603

REVENUE RECOVERY CORP
7005 MIDDLEBROOK PIKE
P.O. BOX 50250
KNOXVILLE, TN 37950

RMS
4200 CANTERA DR. STE 211
WARRENVILLE, IL 60555

RMS
P.O. BOX 361595
COLUMBUS, OH 43236

SB&C, LTD.
ATTN: BANKRUPTCY
PO BOX 519
MOUNT VERNON, WA 98273

SKAGIT AUTO LICENSING, INC.
327 S. BURLINGTON, BLVD
BURLINGTON, WA 98233

SKAGIT PUD
1415 FREEWAY DR.
MOUNT VERNON, WA 98273

SKAGIT RADIOLOGY
PO BOX 2803
MOUNT VERNON, WA 98273

SKAGIT REGIONAL
1415 E. KINCAID ST.
MOUNT VERNON, WA 98274

SNAP FINANCIAL
534 CAMBIE ST.
VANCOUVER BC V 6B2N7

SNOHOMICS COUNTY PUD
P.O. BOX 1107
EVERETT, WA 98206

SNOHOMISH CTY P
20700 44TH AVE WEST, SUITE 100
LYNNWOOD, WA 98036

SQUARE ONE FINANCIAL
4340 S. MONACO ST., 2ND FL
DENVER, CO 80237

THE EVERETT CLINIC
P.O. BOX 5127
EVERETT, WA 98206

THOUSAND TRAILS
P.O. BOX 29352
PHOENIX, AZ 85038

U.S. DEPARTMENT OF EDUCATION
ECMC/BANKRUPTCY
PO BOX 16408
SAINT PAUL, MN 55116

VENMO/PAYPAL
P.O. BOX 965005
ORLANDO, FL 32896

VERIZON WIRELESS
ATTN: VERIZON BANKRUPTCY
500 TECHNOLOGY DR, STE 500
WELDON SPRINGS, MO 63304

WA PARKS AND RECREATION
P.O. BOX 42659
OLYMPIA, WA 98504

WASTE MANAGEMENT
P.O. BOX 7400
PASADENA, CA 91109

WASTE MANAGMENT
2625 W GRANDVIEW RD.
PHOENIX, AZ 85023